

## OFFICE OF THE SECRETARY OF STATE

**JESSE WHITE** • Secretary of State

**OCTOBER 21, 2002** 

6250-601-6

PRIMO COMMUNICATIONS INC. P.O. BOX 81965 ROCHESTER, MI 48308

RE PRIMO COMMINICATIONS INC

## **DEAR SIR OR MADAM:**

IT IS OUR PLEASURE TO APPROVE YOUR REQUEST TO TRANSACT BUSINESS IN THE STATE OF ILLINOIS. ENCLOSED PLEASE FIND THE AUTHORITY ACKNOWLEDGING REGISTRATION.

THIS DOCUMENT MUST BE RECORDED IN THE OFFICE OF THE RECORDER OF THE COUNTY IN ILLINOIS IN WHICH THE REGISTERED OFFICE OF THE CORPORATION IS LOCATED, AS PROVIDED BY SECTION 1.10 OF THE BUSINESS CORPORATION ACT OF THIS STATE. FOR FURTHER INFORMATION CONTACT YOUR RECORDER OF DEEDS.

THE CORPORATION MUST FILE AN ANNUAL REPORT AND PAY FRANCHISE TAXES PRIOR TO THE FIRST DAY OF ITS ANNIVERSARY MONTH (MONTH OF QUALIFICATION) NEXT YEAR. A PRE-PRINTED ANNUAL REPORT FORM WILL BE SENT TO THE REGISTERED AGENT AT THE ADDRESS SHOWN ON THE RECORDS OF THIS OFFICE APPROXIMATELY 60 DAYS PRIOR TO ITS ANNIVERSARY MONTH.

SECURITIES CANNOT BE ISSUED OR SOLD EXCEPT IN COMPLIANCE WITH THE ILLINOIS SECURITIES LAW OF 1953, 815 ILLINOIS COMPILED STATUTES, 5/1 ET SEO. FOR FURTHER INFORMATION, CONTACT THE OFFICE OF THE SECRETARY OF STATE, SECURITIES DEPARTMENT AT (217) 782-2256 OR (312) 793-3384.

SINCERELY YOURS.

**JESSE WHITE** SECRETARY OF STATE

**DEPARTMENT OF BUSINESS SERVICES** CORPORATION DIVISION TELEPHONE (217) 782-6961

late filectopp

02-0609

JW:CD

## Form **BCA-13.15**

(Rev. Jan. 1999)

Director

Jesse White, Secretary of State Department of Business Services Springfield, IL 62756 Telephone (217) 782-1834 http://www.sos.state.il.us

Payment must be made by certified check, cashier's check, Illinois attorney's check, Illinois C.P.A.'s check or money order, payable to "Secretary of State."

## **APPLICATION FOR CERTIFICATE OF AUTHORITY TO** TRANSACT BUSINESS IN ILLINOIS

This space for use by Secretary of State

OCT 2 1 2002

**JESSE WHITE SECRETARY OF STATE** 

This space for use by **Secretary of State** 

Date 10-21-02

License Fee

Franchise Tax \$ 25.00

Filing Fee Penalties #

Approved:

	(a) CO	RPORATE NAME: Prim	no Communications I	nc $R/R$				
	æ							
	(Complete item 1 (b) only if the corporate name is not available in this state.)							
	(By	SUMED CORPORATE NAME of this assumed name of the control of the co	ne, the corporation here	eby agrees NOT to us	e its corporate name in th	ne		
	tran	saction of business in Illino	ois. Form BCA 4.15 is a	ittached.)				
_	(-)		34:-1:					
2.		te or Country of Incorporati						
		e of Incorporation: 2/22/20						
	(c) Per	od of Duration: Perpetual						
3.	(a) Ado	ress of the principal office,	wherever located:	(b) Address of prin	cipal office in Illinois:			
				(If none,	so state)			
	617 Bird	htree CT		NONE				
	Dankant	er Hills, MI 48306						
	Rocheste	r miis, ivii 40500						
			···					
			·					
	Mama an							
4.	name an	d address of the registered	agent and registered					
4.	name an	d address of the registered Registered Agent <u>Ovidi</u>	u		Haiduc			
4.	ivame an	<del>"</del>			Haiduc Last i	Name		
4.	name an	Registered Agent <u>Ovidi</u>	u First Name	Middle Name		Name		
4.	<b>нате</b> ап	<del>"</del>	u	Middle Name	Last I	Name te #		
4.	name an	Registered Agent <u>Ovidi</u> Registered Office <u>1417</u>	u First Name W. Elmdale Sui Number	Middle Name te 3B Street	Last I			
4.	name an	Registered Agent <u>Ovidi</u>	u First Name W. Elmdale Sui Number	Middle Name te 3B Street 60660	Last i Sui	te #		
4.	name an	Registered Agent <u>Ovidi</u> Registered Office <u>1417</u>	u First Name W. Elmdale Sui Number	Middle Name te 3B Street	Last i Sui			
5.		Registered Agent <u>Ovidi</u> Registered Office <u>1417</u>	W. Elmdale Sui Number O. IL	Middle Name te 3B Street 60660 ZIP Code	Last I Sui Cou	te # unty		
5.		Registered Agent <u>Ovidi</u> Registered Office <u>1417</u> <u>Chicag</u>	W. Elmdale Sui Number O. IL	Middle Name te 3B Street 60660 ZIP Code	Last I Sui Cou	te # unty		
5. MI	States an	Registered Agent <u>Ovidi</u> Registered Office <u>1417</u> <u>Chicag</u> d countries in which it is ac	W. Elmdale Suit Number Suit City  dmitted or qualified to to	Middle Name te 3B Street 60660 ZIP Code	Last I Sui Cou	te # unty		
5.	States an	Registered Agent <u>Ovidi</u> Registered Office <u>1417</u> <u>Chicag</u>	W. Elmdale Suit Number Suit City  dmitted or qualified to to	Middle Name te 3B Street 60660 ZIP Code	Last I Sui Cou	te # unty		
5. MI	States an	Registered Agent <u>Ovidi</u> Registered Office <u>1417</u> <u>Chicag</u> d countries in which it is acount residential addresses of Name	W. Elmdale Suin Number  to, IL City  dmitted or qualified to to form the control of the control	Middle Name te 3B Street 60660 ZIP Code ransact business: (Incl	Last I Suit Coul lude state of incorporation City State	te # unty		
5. MI	States an	Registered Agent <u>Ovidi</u> Registered Office <u>1417</u> <u>Chicag</u> d countries in which it is acount residential addresses of Name Adelaida Ardelean	W. Elmdale Suin Number  To, IL City  Condition of qualified to the conficers and directors:  No. & Street Street Conficers Con	Middle Name te 3B Street 60660 ZIP Code ransact business: (Incl	Could be state of incorporation City State IIs MI 48306	te # unty n)		
5. MI	States an	Registered Agent <u>Ovidi</u> Registered Office <u>1417</u> <u>Chicag</u> d countries in which it is acount residential addresses of Name Adelaida Ardelean	W. Elmdale Suin Number  To, IL City  Condition of qualified to the conficers and directors:  No. & Street Street Conficers Con	Middle Name te 3B  Street  60660  ZIP Code  ransact business: (Include the table of the table of table	Country State  City State  City MI 48306  Clis MI 48306	te # unty n)		

7. Purpose or purposes proposed to be pursued in transacting business in this state:

(If not sufficient space to cover this point, add one or more sheets of this size.)

Long distance services (intraLata and Interlata), tollfree numbers, calling car	Long distance services	(intraLata and Interlata)	, tollfree numbers,	calling cards
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8.	Auth	orized and is	ssued shares:		Number of C	'horoo	Number of Shares
\	Clas	s S	Series	Par Value	Number of S Authorize		Issued
_C		non		NPV	100,00	00	100,000
9.		l-in Capital: id-in Capital"	\$replaces the	10,000.00 terms Stated Capital	& Paid-in Surplus a	nd is equal to	, 033334 the total of these accounts.)
10.	(a)		timate of the for the followi	total value of all the ing year:	property* of the	\$	100,000.00
	(b)			total value of all the p ng year that will be lo		\$	0.00
	(c)			I business of the co ere for the following ye		\$	500,000.00
	(d)	State the e transacted Illinois:	stimated annu by it at or froi	ual business of the complaces of business	orporation to be in the State of	\$	20,000.00
11.	Inter	rogatories: (	mportant - th	is section must be co	mpleted.)		
**	<ul> <li>(a) Office or offices to which all contracts with the corporation are forwarded for final acceptance: 3A</li> <li>(b) Number of shares of all classes owned by residents of Illinois: 0</li> <li>(c) Number of shares of all classes owned by non-residents of Illinois: 1</li> <li>(d) Is the corporation transacting business in this state at this time? no</li> <li>(e) If the answer to item 11(d) is yes, state the exact date on which it commenced to transact business in Illinois:</li> </ul>						
12.							nended, duly authenticated, within poration is incorporated.
13.				s caused this statement the facts stated herei			ed officers, each of whom affirms, e in <b>BLACK INK</b> .)
		(Sign)	(Month & Da kure of Secretamin D. Ard		ear) Tetary) (S	ignature of Pa aida Ardelea	lame of Corporation) resident or Vice President) n President Print Name and Title)

- PROPERTY as used in this application shall apply to all property of the corporation, real, personal, tangible, intangible, or mixed without qualifications.
- \*\* When the response to #11(a) lists ONLY an Illinois address, then the total business as reflected in #10(c) is also considered to be Illinois business for the purpose of computing the Illinois allocation factor. By signing this application, the corporation affirms that it is aware that the amount of paid-in capital, and consequently the amount of license fees and franchise taxes, may be proportionately higher due to the Illinois address shown under #11(a).